

Welcome to the PIA for FY 2010!

Congress passed the E-Government Act of 2002 to encourage the use of Web-based Internet applications or other information technology by Government agencies, with the intention of enhancing access to government information and services and increasing the effectiveness, efficiency, and quality of government operations.

To combat public concerns regarding the disclosure of private information, the E-Government Act mandated various measures, including the requirement that Federal agencies conduct a Privacy Impact Assessment (PIA) for projects with information technology systems that collect, maintain, and/or disseminate "personally identifiable information" of the public. Personally identifiable information, or "personal information," is information that may be used to identify a specific person.

The Privacy Act and VA policy require that personally identifiable information only be used for the purpose(s) for which it was collected, unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information, such as use of collected information for marketing.

Directions:

VA 6508 is the directive which outlines the PIA requirement for every System/Application/Program. More information can be found by reading VA 6508.

If you find that you can't click on checkboxes, make sure that you are: 1) Not in "design mode" and 2) you have enabled macros.

PIA Website: http://vawww.privacy.va.gov/Privacy_Impact_Assessments.asp

Roles and Responsibilities:

Roles and responsibilities for the specific process are clearly defined for all levels of staff in the Privacy Impact Assessment Handbook 6202.2 referenced in the procedure section of this document.

- a. The Privacy Officer is responsible for the overall coordination and review of the PIA to ensure compliance with VA Handbook 6202.2.
- b. Records Officer is responsible for supplying records retention and deletion schedules.
- c. Information Technology (IT) staff responsible for the privacy of the system data will perform a PIA in accordance with VA Handbook 6202.2 and to immediately report all anomalies to the Privacy Service and appropriate management chain.
- d. Information Security Officer (ISO) is responsible for assisting the Privacy Officer and providing information regarding security controls.
- e. The CIO is responsible for ensuring that the systems under his or her jurisdiction undergo a PIA. This responsibility includes identifying the IT systems, coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and

systems; coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and reviewing and approving the PIA before submission to the Privacy Service.

Definition of PII (Personally Identifiable Information)

Information in identifiable form that is collected and stored in the system that either directly identifies an individual by name, address, social security number, telephone number, e-mail address, biometric identifiers, photograph, or other unique numbers, codes or characteristics or combined, indirectly identify an individual such as a combination of gender, race, birth date, geographical indicators, license number is also considered PII.

Macros Must Be Enabled on This Form

To enable macros, go to: 1) Tools > Macros > Security - Set to Medium; 2) Click OK; 3) Close the file and when reopening click on Enable Macros at the prompt.

(FY 2010) PIA: System Identification

Program or System Name:	Local Area Network (LAN) West Texas VA Health Care System (519 - Big Spring, TX)
OMB Unique System / Application / Program Identifier (AKA: UPID #):	Exhibit 300 ID: 029-00-02- 00-01-1120-00

The West Texas VA Healthcare System (WTVAHCS) LAN is identified by VA OI&T as an information system that meets criteria for Certification and Accreditation activities. LAN was certified in Fiscal Year 2005 as an accredited system for use by the Veterans Administration (VA) staff in the conduct of official VA business and deemed essential for business activities. This analysis is conducted at least annually or in the event that significant changes occurs with the system. This system is integrated with PIV and has PIV options enabled for logical access to the

Description of System / Application / Program: network.

Facility Name:

Title:	Name:	Phone:	Email:
Privacy Officer:	Dianne Dickerson	432-263-7361	dianne.dickerson@va.gov
Information Security Officer:	Mike McKinley	432-268-2561	john.mckinley@va.gov
Chief Information Officer:	Greg Moore	432-268-2546	greg.moore@va.gov
Person Completing Document:	Kelly Paige	432-263-7361	kelly.paige@va.gov

System Administrator	Royce Islas	432-268-2545	royce.islas@va.gov
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Other Titles:

Other Titles:

Date of Last PIA Approved by VACO Privacy

Services: (MM/YYYY) 04/2008

Date Approval To Operate Expires: 04/2010

What specific legal authorities authorize this program or system:	Title 38, United States Code, Section 7301(a) - VA Directive
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What is the expected number of individuals that will have their PII stored in this system:	100000-150000
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Identify what stage the System / Application / Program is at:	Operations/Maintenance
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The approximate date (MM/YYYY) the system will be operational (if in the Design or Development stage), or the approximate number of years the system/application/program has been in operation.	10 years
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Is there an authorized change control process which documents any changes to existing applications or systems?	Yes
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If No, please explain:

Has a PIA been completed within the last three years?	Yes
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Date of Report (MM/YYYY):	08/2010
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Please check the appropriate boxes and continue to the next TAB and complete the remaining questions on this form.

- ☐ Have any changes been made to the system since the last PIA?
- ☒ Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA?
- ☒ Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?

- ☒ Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?
- ☒ Does this system/application/program collect, store or disseminate PII/PHI data?
- ☒ Does this system/application/program collect, store or disseminate the SSN?

If there is no Personally Identifiable Information on your system , please skip to TAB 12. (See Comment for Definition of PII)

(FY 2010) PIA: System of Records

Is the data maintained under one or more approved System(s) of Records?

Yes

if the answer above is no, please skip to row 16.

For each applicable System(s) of Records, list:

- | | |
|---|---|
| 1. All System of Record Identifier(s) (number): | 79VA19 |
| 2. Name of the System of Records: | West Texas VA Health Care System (LAN) |
| 3. Location where the specific applicable System of Records Notice may be accessed (include the URL): | http://www.rms.oit.va.gov/SOR_Records/79VA19.asp |

Have you read, and will the application, system, or program comply with, all data management practices in the System of Records Notice(s)?

Yes

Does the System of Records Notice require modification or updating?

No

(Please Select Yes/No)

Is PII collected by paper methods?

Yes

Is PII collected by verbal methods?

Yes

Is PII collected by automated methods?

Yes

Is a Privacy notice provided?

Yes

Proximity and Timing: Is the privacy notice provided at the time of data collection?

Yes

Purpose: Does the privacy notice describe the principal purpose(s) for which the information will be used?

Yes

Authority: Does the privacy notice specify the effects of providing information on a voluntary basis?

Yes

Disclosures: Does the privacy notice specify routine use(s) that may be made of the information?

Yes

(FY 2010) PIA: Notice

Please fill in each column for the data types selected.

Data Type	Collection Method	What will the subjects be told about the information collection?	How is this message conveyed to them?	How is a privacy notice provided?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Verbal		Verbally	Verbally
Family Relation (spouse, children, parents, grandparents, etc)	VA File Database		Written	Written
Service Information	Electronic/File Transfer		Verbally	Written
Medical Information	N/A			
Criminal Record Information				
Guardian Information	N/A			
Education Information	N/A			
Benefit Information	N/A			
Other (Explain)				

Data Type	Is Data Type Stored on your system?	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?	Additional Comments
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	No			
Family Relation (spouse, children, parents, grandparents, etc)	No			
Service Information	No			
Medical Information	No			
Criminal Record Information	No			
Guardian Information	No			
Education Information	No			
Benefit Information	No			
Other (Explain)				
Other (Explain)				
Other (Explain)				

(FY 2010) PIA: Data Sharing

Organization	Name of Agency/Organization	Do they access this system?	Identify the type of Data Sharing and its purpose.	Is PII or PHI Shared?	What is the procedure you reference for the release of information?
Internal Sharing: VA Organization					
Other Veteran Organization					
Other Federal Government Agency	CDC	No	Name, SSN, DOB, Health info	Both PII & PHI	VA directive 6500
State Government Agency	State Tumor Registry	No	Name, SSN, DOB, Health info	Both PII & PHI	VA Directive 6500
Local Government Agency		No		N/A	
Research Entity		No		N/A	
Other Project / System: Users		No		N/A	
Other Project / System:					
Other Project / System					

(FY 2010) PIA: Access to Records

Does the system gather information from another system?
Please enter the name of the system:

No

Per responses in Tab 4, does the system gather information from an individual?

No

If information is gathered from an individual, is the information provided:

- ☐ Through a Written Request
☐ Submitted in Person
☐ Online via Electronic Form

Is there a contingency plan in place to process information when the system is down?

Yes

(FY 2010) PIA: Secondary Use

Will PII data be included with any secondary use request?

Yes

if yes, please check all that apply:

- ☒ Drug/Alcohol Counseling ☒ Mental Health ☒ HIV
☒ Research ☒ Sickle Cell ☐ Other (Please Explain)

Describe process for authorizing access
to this data.

The VA Regional Office will
issue an order outlining the
type of information to be
released

Answer:

(FY 2010) PIA: Program Level Questions

Does this PIA form contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public?

No

If Yes, Please Specify:

Explain how collected data are limited to required elements:

Answer: LAN used to store information related to organizational duties

How is data checked for completeness?

Answer: Compared to Vista data when appropriate

What steps or procedures are taken to ensure the data remains current and not out of date?

Answer: Data is kept current by daily use.

How is new data verified for relevance, authenticity and accuracy?

Answer: Through comparison with Vista and other systems of information

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2010) PIA: Retention & Disposal

What is the data retention period?

Answer: The data retention period is dependent upon the type of type contained in the record system.

Personnel records, medical records, budget records, audit reports all have different time frames that they must be kept for and then disposed of or perhaps even archived off station. Paper medical records may be archived after complete scanning into the system, three years after death three years after the last visit. If not recalled from the archive the records will then be destroyed after 72 years.

Explain why the information is needed for the indicated retention period?

Answer: The information is maintained for a total of 75 years from the last visit in case the patient or the family has need to request information, research and claim, research a family history of a specific disease, etc.

What are the procedures for eliminating data at the end of the retention period?

Answer: After the retention period has expired at the facility level, depending upon what the documents are, they may be shredded or they may be archived at a larger storage facility (as are medical records). If the full retention (75 years for medical records) has passes the documents will be disposed of using the current method in practice at the time. Currently we are in a Litigation Hold status and are unable to destroy anything pertaining to patients.

Where are these procedures documented?

Answer: These procedures are fully documented within the Central Records Unit operating procedures

How are data retention procedures enforced?

Answer: Currently we are in a Litigation Hold status and are unable to destroy anything pertaining to patients.

Has the retention schedule been approved by the National Archives and Records Administration (NARA):

Yes

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2010) PIA: Children's Online Privacy Protection Act (COPPA)

Will information be collected through the internet from children under age 13?

No

If Yes, How will parental or guardian approval be obtained?

Answer:

(FY 2010) PIA: Security

Is the system/application/program following IT security Requirements and procedures required by federal law and policy to ensure that information is appropriately secured.

Yes

Has the system/application/program conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls..

Yes

Is security monitoring conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?

Yes

Is security testing conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?

Yes

Are performance evaluations conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information?

Yes

If 'No' to any of the 3 questions above, please describe why:

Answer:

Is adequate physical security in place to protect against unauthorized access?

Yes

If 'No' please describe why:

Answer:

Explain how the project meets IT security requirements and procedures required by federal law.

Answer: This facility has followed all security policies, procedures, and guidance in ensuring all safeguards have been taken and/or acted upon in protecting this asset.

Explain what security risks were identified in the security assessment? (Check all that apply)

- ☒ Air Conditioning Failure
- ☐ Chemical/Biological Contamination
- ☐ Blackmail
- ☐ Bomb Threats
- ☐ Cold/Frost/Snow
- ☒ Communications Loss
- ☐ Computer Intrusion
- ☐ Data Destruction
- ☐ Data Disclosure
- ☐ Data Integrity Loss
- ☐ Denial of Service Attacks
- ☐ Earthquakes
- ☐ Eavesdropping/Interception
- ☒ Fire (False Alarm, Major, and Minor)
- ☒ Flooding/Water Damage
- ☒ Hardware Failure
- ☐ Malicious Code
- ☐ Computer Misuse
- ☒ Power Loss
- ☐ Sabotage/Terrorism
- ☐ Storms/Hurricanes
- ☐ Substance Abuse
- ☐ Theft of Assets
- ☐ Theft of Data
- ☐ Vandalism/Rioting
- ☐ Errors (Configuration and Data Entry)
- ☐ Burglary/Break In/Robbery
- ☐ Identity Theft
- ☐ Fraud/Embezzlement

Answer: (Other Risks) Tornado

Explain what security controls are being used to mitigate these risks. (Check all that apply)

- ☒ Risk Management
- ☒ Access Control
- ☒ Awareness and Training
- ☒ Contingency Planning
- ☒ Physical and Environmental Protection
- ☒ Personnel Security
- ☒ Certification and Accreditation Security Assessments
- ☒ Audit and Accountability
- ☒ Configuration Management
- ☒ Identification and Authentication
- ☒ Incident Response
- ☒ Media Protection

Answer: (Other Controls)

PIA: PIA Assessment

Identify what choices were made regarding the project/system or collection of information as a result of performing the PIA.

e loss of availability could be expected adverse effect on operations, assets or individuals.

The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.

The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

The potential impact is **high** if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals.

Availability Assessment: If the data being collected is not available to process for any reason what will the potential impact be upon the system or organization?

(Choose One)

☐ The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.

☒ The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

☐ The potential impact is **high** if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals.

Integrity Assessment: If the data being collected has been corrupted for any reason what will the potential impact be upon the system or organization?

(Choose One)

☒ The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.

☐ The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

☐

☐

Confidentiality Assessment: If the data being collected has been shared with unauthorized individuals what will the potential impact be upon the system or organization?

(Choose One)

☒

☐

☐

The controls are being considered for the project based on the selections from the previous assessments?

The controls are being considered for the project based on the selections from the previous assessments? The minimum security requirements for our high impact system cover seventeen security-related areas with regard to protecting the confidentiality, integrity, and availability of VA information systems and the information processed, stored, and transmitted by those systems. The security-related areas include: access control; awareness and training; audit and accountability; configuration management; contingency planning; identification and authentication; incident response; maintenance; media protection; physical and environmental protection; planning; personnel security; risk assessment; systems and services acquisition; system and communications protection; and system and information integrity. Our facility employs all security controls in the respective high impact security control baseline unless specific exceptions have been allowed based on the tailoring guidance provided in NIST Special Publication 800-53 and specific VA directives

Please add additional controls:

Loss of system availability is addressed through detailed contingency plans that identify alternate processing sites and methods.

(FY 2010) PIA: Additional Comments

Add any additional comments on this tab for any question in the form you want to comment on.
Please indicate the question you are responding to and then add your comments.

The LAN collects PII but most of the collection of information is stored in the VistA system.

(FY 2010) PIA: VBA Minor Applications

Explain what minor application that are associated with your installation? *(Check all that apply)*

Records Locator System	Education Training Website	Appraisal System
Veterans Assistance Discharge System (VADS)	VR&E Training Website	Web Electronic Lender Identification
LGY Processing	VA Reserve Educational Assistance Program	CONDO PUD Builder
Loan Service and Claims	Web Automated Verification of Enrollment	Centralized Property Tracking System
LGY Home Loans	Right Now Web	Electronic Appraisal System
Search Participant Profile (SPP)	VA Online Certification of Enrollment (VA-ONCE)	Web LGY
Control of Veterans Records (COVERS)	Automated Folder Processing System (AFPS)	Access Manager
SHARE	Personal Computer Generated Letters (PCGL)	SAHSHA
Modern Awards Process Development (MAP-D)	Personnel Information Exchange System (PIES)	VBA Data Warehouse
Rating Board Automation 2000 (RBA2000)	Rating Board Automation 2000 (RBA2000)	Distribution of Operational Resources (DOOR)
State of Case/Supplemental (SOC/SSOC)	SHARE	Enterprise Wireless Messaging System (Blackberry)
Awards	State Benefits Reference System	VBA Enterprise Messaging System
Financial and Accounting System (FAS)	Training and Performance Support System (TPSS)	LGY Centralized Fax System
Eligibility Verification Report (EVR)	Veterans Appeals Control and Locator System (VACOLS)	Review of Quality (ROQ)
Automated Medical Information System (AMIS)290	Veterans On-Line Applications (VONAPP)	Automated Sales Reporting (ASR)
Web Automated Reference Material System (WARMS)	Automated Medical Information Exchange II (AIME II)	Electronic Card System (ECS)
Automated Standardized Performance Elements Nationwide (ASPEN)	Committee on Waivers and Compromises (COWC)	Electronic Payroll Deduction (EPD)
Inquiry Routing Information System (IRIS)	Common Security User Manager (CSUM)	Financial Management Information System (FMI)
National Silent Monitoring (NSM)	Compensation and Pension (C&P)	Purchase Order Management System (POMS)
Web Service Medical Records (WebSMR)	Record Interchange (CAPRI)	Veterans Canteen Web
Systematic Technical Accuracy Review (STAR)	Control of Veterans Records (COVERS)	Inventory Management System (IMS)
Fiduciary STAR Case Review	Corporate Waco, Indianapolis, Newark, Roanoke, Seattle (Corporate WINRS)	Synquest
Veterans Exam Request Info System (VERIS)	Fiduciary Beneficiary System (FBS)	RAI/MDS
Web Automated Folder Processing System (WAFPS)	Hearing Officer Letters and Reports System (HOLAR)	ASSISTS
	Inforce	
Courseware Delivery System (CDS)	Awards	MUSE
Electronic Performance Support System (EPSS)	Actuarial	Bbraun (CP Hemo)
Veterans Service Representative (VSR) Advisor	Insurance Self Service	VIC
Loan Guaranty Training Website	Insurance Unclaimed Liabilities	BCMA Contingency Machines
C&P Training Website	Insurance Online	Script Pro

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Minor app #1	Name		Description		Comments
	<input type="checkbox"/> Is PII collected by this min or application?				
	<input type="checkbox"/> Does this minor application store PII?				
	If yes, where?				
	Who has access to this data?				

Minor app #2	Name		Description		Comments
	<input type="checkbox"/> Is PII collected by this min or application?				
	<input type="checkbox"/> Does this minor application store PII?				
	If yes, where?				
	Who has access to this data?				

Minor app #3	Name		Description		Comments
	<input type="checkbox"/> Is PII collected by this min or application?				
	<input type="checkbox"/> Does this minor application store PII?				
	If yes, where?				
	Who has access to this data?				

Baker System	Veterans Assistance Discharge System (VADS)
Dental Records Manager	VBA Training Academy
Sidexis	Veterans Service Network (VETSNET)
Priv Plus	Waco Indianapolis, Newark, Roanoke, Seattle (WINRS)
Mental Health Asisstant	BIRLS
Telecare Record Manager	Centralized Accounts Receivable System (CARS)
Omnicell	Compensation & Pension (C&P)
Powerscribe Dictation System	Corporate Database
EndoSoft	Control of Veterans Records (COVERS)
Compensation and Pension (C&P)	Data Warehouse
Montgomery GI Bill	INS - BIRLS
Vocational Rehabilitation & Employment (VR&E) CH 31	Mobilization
Post Vietnam Era educational Program (VEAP) CH 32	Master Veterans Record (MVR)
Spinal Bifida Program Ch 18	BDN Payment History
C&P Payment System	
Survivors and Dependents Education Assistance CH 35	
Reinstatement Entitelment Program for Survivors (REAPS)	
Educational Assistance for Members of the Selected Reserve Program CH 1606	
Reserve Educational Assistance Program CH 1607	
Compensation & Pension Training Website	
Web-Enabled Approval Management System (WEAMS)	
FOCAS	
Work Study Management System (WSMS)	
Benefits Delivery Network (BDN)	
Personnel and Accounting Integrated Data and Fee Basis (PAID)	
Personnel Information Exchange System (PIES)	
Rating Board Automation 2000 (RBA2000)	
SHARE	
Service Member Records Tracking System	

(FY 2010) PIA: VISTA Minor Applications

Explain what minor application that are associated with your installation? *(Check all that apply)*

ACCOUNTS RECEIVABLE	DRUG ACCOUNTABILITY	INPATIENT MEDICATIONS
ADP PLANNING (PLANMAN)	DSS EXTRACTS	INTAKE/OUTPUT
ADVERSE REACTION TRACKING	EDUCATION TRACKING	INTEGRATED BILLING
ASISTS	EEO COMPLAINT TRACKING	INTEGRATED PATIENT FUNDS
AUTHORIZATION/SUBSCRIPTION	ELECTRONIC SIGNATURE	INTERIM MANAGEMENT SUPPORT
AUTO REPLENISHMENT/WARD STOCK	ENGINEERING	KERNEL
AUTOMATED INFO COLLECTION SYS	ENROLLMENT APPLICATION SYSTEM	KIDS
AUTOMATED LAB INSTRUMENTS	EQUIPMENT/TURN-IN REQUEST	LAB SERVICE
AUTOMATED MED INFO EXCHANGE	EVENT CAPTURE	LETTERMAN
BAR CODE MED ADMIN	EVENT DRIVEN REPORTING	LEXICON UTILITY
BED CONTROL	EXTENSIBLE EDITOR	LIBRARY
BENEFICIARY TRAVEL	EXTERNAL PEER REVIEW	LIST MANAGER
CAPACITY MANAGEMENT - RUM	FEE BASIS	MAILMAN
CAPRI	FUNCTIONAL INDEPENDENCE	MASTER PATIENT INDEX VISTA
CAPACITY MANAGEMENT TOOLS	GEN. MED. REC. - GENERATOR	MCCR NATIONAL DATABASE
CARE MANAGEMENT	GEN. MED. REC. - I/O	MEDICINE
CLINICAL CASE REGISTRIES	GEN. MED. REC. - VITALS	MENTAL HEALTH
CLINICAL INFO RESOURCE NETWORK	GENERIC CODE SHEET	MICOM
CLINICAL MONITORING SYSTEM	GRECC	MINIMAL PATIENT DATASET
CLINICAL PROCEDURES	HEALTH DATA & INFORMATICS	MYHEALTHVET
CLINICAL REMINDERS	HEALTH LEVEL SEVEN	Missing Patient Reg (Original) A4EL
CMOP	HEALTH SUMMARY	NATIONAL DRUG FILE
CONSULT/REQUEST TRACKING	HINQ	NATIONAL LABORATORY TEST
CONTROLLED SUBSTANCES	HOSPITAL BASED HOME CARE	NDBI
CPT/HCPCS CODES	ICR - IMMUNOLOGY CASE REGISTRY	NETWORK HEALTH EXCHANGE
CREDENTIALS TRACKING	IFCAP	NOIS
DENTAL	IMAGING	NURSING SERVICE
DIETETICS	INCIDENT REPORTING	OCCURRENCE SCREEN
DISCHARGE SUMMARY	INCOME VERIFICATION MATCH	ONCOLOGY
DRG GROUPER	INCOMPLETE RECORDS TRACKING	ORDER ENTRY/RESULTS REPORTING

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

	Name		Description		Comments
Minor app #1			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

	Name		Description		Comments
Minor app #2			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

	Name		Description		Comments
Minor app #3			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

OUTPATIENT PHARMACY	SOCIAL WORK
PAID	SPINAL CORD DYSFUNCTION
PATCH MODULE	SURGERY
PATIENT DATA EXCHANGE	SURVEY GENERATOR
PATIENT FEEDBACK	TEXT INTEGRATION UTILITIES
PATIENT REPRESENTATIVE	TOOLKIT
PCE PATIENT CARE ENCOUNTER	UNWINDER
PCE PATIENT/IHS SUBSET	UTILIZATION MANAGEMENT ROLLUP
PHARMACY BENEFITS MANAGEMENT	UTILIZATION REVIEW
PHARMACY DATA MANAGEMENT	VA CERTIFIED COMPONENTS - DSSI
PHARMACY NATIONAL DATABASE	VA FILEMAN
PHARMACY PRESCRIPTION PRACTICE	VBECs
POLICE & SECURITY	VDEF
PROBLEM LIST	VENDOR - DOCUMENT STORAGE SYS
PROGRESS NOTES	VHS&RA ADP TRACKING SYSTEM
PROSTHETICS	VISIT TRACKING
QUALITY ASSURANCE INTEGRATION	VISTALINK
QUALITY IMPROVEMENT CHECKLIST	VISTALINK SECURITY
QUASAR	VISUAL IMPAIRMENT SERVICE TEAM ANRV
RADIOLOGY/NUCLEAR MEDICINE	VOLUNTARY TIMEKEEPING
RECORD TRACKING	VOLUNTARY TIMEKEEPING NATIONAL
REGISTRATION	WOMEN'S HEALTH
RELEASE OF INFORMATION - DSSI	CARE TRACKER
REMOTE ORDER/ENTRY SYSTEM	
RPC BROKER	
RUN TIME LIBRARY	
SAGG	
SCHEDULING	
SECURITY SUITE UTILITY PACK	
SHIFT CHANGE HANDOFF TOOL	

(FY 2010) PIA: Minor Applications

Add any information concerning minor applications that may be associated with your system. Please indicate the name of the minor application, a brief description, and any comments you may wish to include. If you have more than 3 minor applications please copy then below sections as many times as needed.

Minor app #1	Name		Description		Comments
			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

Minor app #2	Name		Description		Comments
			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

Minor app #3	Name		Description		Comments
			Is PII collected by this min or application?		
			Does this minor application store PII?		
			If yes, where?		
			Who has access to this data?		

(FY 2010) PIA: Final Signatures

Facility Name: 0

Title:	Name:	Phone:	Email:
Privacy Officer:	Dianne Dickerson	432-263-7361	dianne.dickerson@va.gov

Digital Signature Block

Information Security Officer:	Mike McKinley	432-268-2561	john.mckinley@va.gov
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Digital Signature Block

Chief Information Officer:	Greg Moore	432-268-2546	greg.moore@va.gov
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Digital Signature Block

Person Completing Document:	Kelly Paige	432-263-7361	kelly.paige@va.gov
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Digital Signature Block

System / Application / Program Manager:	Royce Islas	432-268-2545	royce.islas@va.gov
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Digital Signature Block

Date of Report: 8/1/2010
Exhibit 300 ID: 029-00-02-00-01-
OMB Unique Project Identifier 1120-00



LAN Signitures

Project Name

Local Area Network (LAN) West
Texas VA Health Care System (519 -
Big Spring, TX)



LAN Signitures